## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION	FEC IDENTIFICATION NUMBER ▼
CLUB FOR GROWTH ACTION	C C00487470
Check if 24-hour report  48-hour report  New report  Amends report filed on	n
Full Name of Payee Club for Growth	Date of Public Distribution/Dissemination
	05 07 2014
Mailing Address 2001 L St., NW, Ste. 600	Amount
City State Zip Code	298.88
	Transaction ID : SE.44645 Date of Disbursement or Obligation
Purpose of Expenditure mail production costs (from advance line 21)  Category/ Type	05 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office S	Sought: House District: 00
THAD COCHRAN Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought  Disburs 2014	ement For: X Primary General  Other (specify) ▶
Full Name of Payee Club for Growth	Date of Public Distribution/Dissemination
	05 07 2014
Mailing Address 2001 L St., NW, Ste. 600	Amount
City State Zip Code	20.99
	ransaction ID : SE.44647 Date of Disbursement or Obligation
Purpose of Expenditure mail production costs (from advance line 21)  Category/ Type	05 07 2014
Name of Federal Candidate Support Office 9	Sought: House District: 00
CHRIS MCDANIEL Oppose F	President State: MS
Calendar Year-To-Date Per Election for Office Sought  Disburs 2014	sement For:
(a) SUBTOTAL of Itemized Independent Expenditures	319.87
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Chris Chocola [Electronically Filed] Date 05	09 2014
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
CLUB FOR GROWTH ACTION	C C00487470
Check if 24-hour report X 48-hour report New report Amends report filed	on M M / D = D / Y = Y = Y
Full Name of Payee  Jamestown Associates	Date of Public Distribution/Dissemination
Mailing Address 5 Maple Road	05 07 2014 Amount
Ste. 300	
City State Zip Code Princeton NJ 08540	7419.00 Transaction ID : SE.44643
Purpose of Expenditure mail production costs  Category/	Date of Disbursement or Obligation  O5 06 2014
Type	2014
THAD COOLIDAN	e Sought: House District: 00
Орроѕе	President Senate State: MS  ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought  1305004.47  DISDL 2014	
Full Name of Payee Stephen Clouse and Associates	Date of Public Distribution/Dissemination
Molling Address	05 07 2014
43538 Golden Meadow Circle	Amount
City State Zip Code	756.33
Ashburn VA 20147	Transaction ID : SE.44646  Date of Disbursement or Obligation
Purpose of Expenditure mail production costs  Category/ Type	05 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	e Sought: House District: 00
CHRIS MCDANIEL Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: X Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	8175.33
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of eithe party committee) any political party committee or its agent.	
	09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
CLUB FOR GROWTH ACTION	C C00487470	
Check if 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y	
Full Name of Payee Thomas Graphics, Inc.	Date of Public Distribution/Dissemination	
Mailing Address 9501 North I.H. 35	05 07 2014 Amount	
City State Zip Code	8377.49	
Austin TX 78753	Transaction ID : SE.44644 Date of Disbursement or Obligation	
Purpose of Expenditure mail production costs, postage Category/ Type	05 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support Office	Sought: House District: 00	
THAD COCHRAN	President Senate State: MS	
Calendar Year-To-Date Per Election for Office Sought  Disbur 2014	sement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
Mailing Address	Amount	
City State Zip Code		
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation	
	Sought: House District:  President Senate State:	
	rsement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	8377.49	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	16872.69	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Chris Chocola [Electronically Filed] Date 05		